

01/17/02 31044 U.S. PTO

01-23-02

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Patent and Trademark U.S. DEPARTMENT OF COMMERCE

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket	7162-4
		First Inventor	RAWNICK, et al.
		Title	Enhanced Bandwidth Dual Layer Current Sheet Antenna
		Express Mail Label No.	EL 920423042 US

<b>APPLICATION ELEMENTS</b> See MPEP Chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Commissioner for Patents Box Patent Application Washington, DC 20231
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<p>1 <input checked="" type="checkbox"/> <b>Fee transmittal Form</b> (Submit an original and a duplicate for fee processing)</p> <p>2 <input checked="" type="checkbox"/> <b>Specification</b> (Total <input )<br="" type="text" value="22"/>(preferred arrangement set forth below)</p> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross References to Related Applications</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> <p>3 <input checked="" type="checkbox"/> <b>Drawing(s)</b> (35 USC 113) (Total Sheets <input )<="" p="" type="text" value="4"/><p>4. <b>Oath or Declaration</b> (Total Pages <input )<="" p="" type="text" value="2"/><p>a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from prior Application (37 CFR 1.63(d))</p><p>b. <input type="checkbox"/> (for continuation/divisional with Box 17 completed) (Note Box 5 below)</p><p>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed Statement attached deleting inventor(s) named in prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p><p>5 <input type="checkbox"/> <b>Incorporation By Reference</b> (useable if Box 4b is checked) The entire disclosure of the prior application from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference herein.</p></p></p>	<p>6. <input type="checkbox"/> <b>Microfiche Computer Program (Appendix)</b></p> <p>7. <b>Nucleotide and/or Amino Acid Sequence Submission</b> (if applicable, all necessary)</p> <p><input type="checkbox"/> Computer readable Copy</p> <p><input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p><input type="checkbox"/> Statement Verifying identity of above</p>
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<b>ACCOMPANYING APPLICATION PARTS</b>	
8 <input checked="" type="checkbox"/> <b>Assignment Papers</b> (cover sheet & documents)	
9 <input type="checkbox"/> 37 CFR 3.73(b) Statement (where there is an assignee)	<input type="checkbox"/> Power of Attorney
10 <input type="checkbox"/> <b>English Translation Document</b> (if applicable)	
11 <input checked="" type="checkbox"/> <b>Information Disclosure Statement (IDS)/PTO-1449</b>	<input checked="" type="checkbox"/> Copies of IDS Citations
12 <input type="checkbox"/> <b>Preliminary Amendment</b>	
13 <input checked="" type="checkbox"/> <b>Return receipt postcard (MPEP 503)</b> (Should be specifically itemized)	
14 <input type="checkbox"/> *Small Entity Statement(s)	<input type="checkbox"/> Statement filed in prior application Status still proper and desired
15 <input type="checkbox"/> <b>Certified copy of priority Document(s)</b> (if foreign priority is claimed)	
16 <input checked="" type="checkbox"/> <b>Other: Fee: \$834.00</b>	


\* A newstatement is required to pay small entity fees, except where one has been filed in a prior application and is being relied upon

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no. \_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

<b>18. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label <input type="text" value=""/> or <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label)					
<b>NAME</b> Akerman, Senterfitt & Eidson, P.A.					
<b>ADDRESS</b> Post Office Box 3188					
<b>CITY</b>	West Palm Beach	<b>STATE</b>	FL	<b>ZIP CODE</b>	33402-3188
<b>COUNTRY</b>	USA	<b>TELEPHONE</b>	561/653-5000	<b>FAX</b>	561/653-5333

<b>Name (Print/Type)</b>	Robert J. Sacco	<b>Registration No. (Attorney/Agent)</b>	35,667
<b>Signature</b>		<b>Date</b>	1/17/02

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**FEE TRANSMITTAL**  
**for FY 2002**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$ ) 834.00**Complete if Known**

Application Number	
Filing Date	
First Named Inventor	RAWNICK, et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	7162-4

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	50-0951
Deposit Account Name	Akerman Senterfitt

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	Fee Paid	
101	740	201	370	Utility filing fee	740
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

**SUBTOTAL (1)** (\$ ) 740**2. EXTRA CLAIM FEES**

Total Claims	23	-20** =	3	x	18	=	54
Independent Claims		-3** =		x		=	
Multiple Dependent							

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$ ) 54

\*\*or number previously paid, if greater; For Reissues, see above


**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	Fee Paid	
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ ) 40**SUBMITTED BY**

Name (Print/Type)	ROBERT J. SACCO	Registration No. (Attorney/Agent)	35,667	Telephone	561 653 5000
Signature		Date	1/17/02		

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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